



Nelson Memorial United Methodist Church
 P.O. Box 254
 200 Main St., Hebron, Md. 21830
 443-736-3087
nelsonschurch200@gmail.com

Policy for Use of Church Facilities

Guidelines

1. Users are responsible for set-up and take-down of tables, chairs and any equipment they use.
2. Alcohol, drugs, profanity or smoking are not permitted anywhere on the premises. Music and dancing must be pre-approved. Furniture and equipment are to be returned to the way it was arranged when you arrived.
3. Use of the stoves and ovens is not allowed .
4. Use of the refrigerator, sinks, and microwave must be preapproved by trustees.
5. Users must provide their own paper products, trash bags, etc.
6. Clean-up must occur the day of your event. Any trash must be removed from the church property the same day of your event.
7. Parking is allowed in the church parking lot at all times. Parking in the Post Office parking lot and the Hebron Savings Bank lot is only allowed after business hours (Monday through Saturday after 5 pm, Sunday all day) Parking on Church St. is allowed.
8. Activities must be concluded by 11:00 pm.
9. Use of the church’s sound system must be prearranged.
10. Only those areas requested for a particular function may be utilized. All other areas of the church should be considered “**unavailable**” to the group.
11. There will be no activity that contradicts Nelson’s statement of faith.
12. If a non-member seeks to use any part of the church facility, a church member must be noted as an alternate contact on the building use request form.
13. If a wedding or funeral service is to take place on the premises, conversation must first be held with the current pastor before date will be saved on the church calendar.

On behalf of all who attend the event detailed below, I agree that Nelson Memorial United Methodist Church or any representative or trustee is not responsible for any loss of property or any injury that occurs during or that is related to the use of Nelson’s facilities.

Date/Time of use _____ Purpose _____

Areas to be used _____

Signature of Contact #1 _____ Date _____

Signature of Contact #2 _____ Date _____

Phone/Email contact for day of event _____

Mailing Address of Contact Person for event (please print)

Received completed by office (date/initials) _____